

RECORD OF TRAINING AND FIT TESTING					
EMPLOYEE NAME (Printed)					
RESPIRATOR INFORMATION					
TYPE RESPIRATOR TO BE ISSUED	MANUFACTURER	MODEL	SIZE (S, M, or L)	WEIGHT (Pounds and Ounces)	SERIAL NO
CONDITIONS OF USE					
The duration and frequency of respirator to be used by the employee:					
The expected physical work effort:					
Additional protective clothing and equipment to be worn: <div> <input type="checkbox"/> Safety Boots/Shoes             <input type="checkbox"/> Safety Glasses           </div> <div> <input type="checkbox"/> Safety Goggles             <input type="checkbox"/> Rainwear           </div> <div> <input type="checkbox"/> Gloves (Cotton/Leather)             <input type="checkbox"/> Gloves Chemical           </div> <div> <input type="checkbox"/> Blast Suits             <input type="checkbox"/> Hardhat           </div> <div> <input type="checkbox"/> Safety Vest             <input type="checkbox"/> Other (specify)           </div>					
Temperature and humidity extremes that may be encountered:					
TRAINING REQUIREMENTS					
Why respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator.					
What the limitations and capabilities of the respirator are.					
How to inspect, put on and remove, use, and check the seals of the respirator.					
What the procedures are for maintenance and storage of the respirator.					

## How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators

## DATE AND SIGNATURE OF TRAINING AND FIT TESTING

[illegible]